

## Salato Wildlife Education Center

## **Internship Application**

Application Date// Personal Information						
Name						
Last	First	Middle				
Street						
City	State	Zip				
Phone (home)	(work)					
(Cell) E-mail	!					
Date of Birth//						
Medical Information: Please list any medical condition (optional)	_					
Emergency Contact: Name Phone ()	Name Phone ()					
<b>Education</b>						
High School/GED	Year Completed	Grade Level				
College(s) attended	Degree and Year	Major/Minor				
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## Which Internship season are interests you most? (February 15-May10) 2 positions available \_Spring (May 15-July 31) 1 position available Summer (August 1-December 15) 2 positions available Fall More About You Is this internship part of a school course requirement? \_\_\_\_Yes \_\_\_\_No Number of internships hours needed? What are some of your career goals? If you have a particular **project** or **assignment**, please give details below: What do you hope to gain from your experience at Salato?

When and how often are you able to work?

## **Interests & Experience**

_Volunteer Conservation Educator _Landscaping and Gardening		Hiking Trail	Hiking Trail Maintenanc	
k Experience				
Company				
Department_				
Job Title				_
Street				
City		DI // )		
	_	Phone # ()		
Supervisor				
Company				
Job Title				_
Street				
City				
State	Zip	Phone # ()		
Duties				
Supervisor _				<del></del>
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rences (3)				_

Please Mail or Deliver to: Salato Wildlife Education Center Attn: Volunteer Coordinator

#1 Sportsman's Lane Frankfort, KY 40601